

founded, are chicken-pox, impetigo contagiosa, pustular syphiloderm, urticaria papulosa and acne. Of these chicken-pox is the most common, chiefly owing to the fact that the premonitory symptoms have been so mild that the patient has misrepresented them to the physician; and coupled with these mis-statements there is found on looking at the exposed parts only a few, often only one or two, abortive vesicles or pustules. The examination is not pushed any further. Both parties concerned are satisfied; the patient particularly so from the knowledge of the fact that isolation will not be necessary, although he may be well aware that had the physician stripped him, an altogether different condition of affairs would have been found on the "hidden parts." The blame is in most instances to be laid at the door of the patient rather than at that of the medical attendant for the mistake, for had the one been honest, the other would have been more painstaking in his examination. In smallpox, believe nothing you hear, doubt much you see on first appearances, but carefully note all that the surface of the body has to reveal to both touch and sight.

The chief characteristics which distinguish chicken-pox from the present mild form of smallpox are: 1. It is a disease chiefly confined to childhood, being only occasionally seen in adults. 2. It rapidly runs its course in a week, passing through the stages of pimple, vesicle and scab, often within twenty-four hours after the first appearance of the papular rose spot the vesicle develops. 3. The premonitory symptoms are but slightly marked; indeed, are frequently wanting altogether. 4. The temperature accompanies or follows the appearance of the rash. 5. The vesicles of chicken-pox are ovoid or irregular in appearance, and attain their maximum development much quicker than do those of smallpox. 6. The eruption, as a rule, appears first on the portions of the body covered by clothing. 7. After the crusts fall off they leave a red instead of a pigmented spot. 8. Does not appear on palms of hands or soles of feet.

With these differential symptoms, it must be stated that many cases of smallpox of the present type occur, making it extremely difficult to correctly place them.\* "It may, however, be stated in a general way, that a mildly febrile eruption, appearing without prodromal symptoms, being distinctly vesicular from the beginning, and commencing to desiccate on the second or third day, should be regarded as chicken-pox; and on the other hand, an acute exanthem, preceded by an initial stage of forty-eight hours, in which the temperature was distinctly elevated, beginning as papules and ending in vesicles and vesico-pustules, even though the period of evolution be short, should be regarded as smallpox."

*Impetigo Contagiosa.*—The chief points in the differential diagnosis of this disease are: 1. It is a skin affection, rarely accompanied at any stage of its progress by an elevation of temperature. 2. There is no initial stage. 3. It does not begin as a papule, but as a vesicle, or vesico-pustule, or growth of the same upon an apparently normal skin. 4. It appears chiefly on the face, head and hands—the exposed parts. 5. It is usually unsymmetrical and superficial, and spreads from the periphery, often attaining the size of a ten-cent piece. 6. The crusts are of differing degrees of thickness, are varied in color from straw to a brownish hue. They are friable, crumbling very easily. On removal, the base is covered with pus, which on healing leaves no scar. 7. Fresh inoculation may occur in the same individual, the infecting material being generally carried by the finger nails to any part of the skin.

\* Com. W. Welch, M.D., Philadelphia Medical Journal, Nov. 18th, 1889.